Section 1: Cover Sheet

Office Use Only

Use this form to:

- 1) Register as a lobbyist in accordance with City Code Section 4-8-5;
- 2) Amend or update registration information previously provided in accordance with City Code Section 4-8-5;
- 3) Terminate registration as a lobbyist per City Code Section 4-8-5;
- 4) Report lobbying activities engaged in during the preceding calendar quarter in accordance with Section 4-8-6 of the City Code; or
- 5) For entities electing to register and report as a business entity per City Code Section 4-8-4, this form must be filled out for each individual lobbyist employed by the entity and filed with the Entity Reporting Cover Sheet.

For detailed instructions on how to complete this form, see the Lobbyist Reporting Form: Individual Reporting Guide, or the Lobbyist Reporting Form: Entity Reporting Guide.

LOBBYIST NAME	Title First Name* Alice Last Name* Myers My employer is a 501c(3) non-profit organization	Suffix	Middle A.
LOBBYIST PERMANENT BUSINESS STREET ADDRESS	Permanent Business Street Address* 7800 Southwest Parkway City* Austin	Apartment or S 415 State* TX	Zip Code*
LOBBYIST BUSINESS MAILING ADDRESS	Business Mailing Address* [7800 Southwest Parkway] City* Austin	Apartment or S 415 State* TX	Zip Code*
REPORT TYPE	Report Type*: Check a New Lobbyist Registration Quarterly Activity Report: January Report Type*: Check a Update Current Lobbyist Registration	Annual Renewal Lobbyist Registr Quarterly Activit Report: July	ation Lobbyist Registration

^{*} Indicates a required field



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

To report more than one munic	ipai Question, cii	ick the Add Additional Municipal Question is	Jutton below.		
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Monitor: Code Next; Permits and site plans; various city policies and regulations that may affect clients' interests.				
PROPERTY ADDRESS	1—	ipal question pertains to real property. *If cho are required.	ecked, either a pro		
OR			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
LEGAL DESCRIPTION			-		
	City		State	Zip Code	
	Property Legal [Description			
Subject Matter(s)*: Check all su	bject matters that	at apply to the municipal question above			
Accessibility or Persons with	Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding)	
		Finance, Budget, or Investments	Permits (Ot	her)	
Animals		Health, Healthcare, Mental Health, or Human Services		ty, Policy, Fire, EMS, or Planning and Response	
Annexation		Historic Preservation	Public Utilit or Recycling	ies, Energy, Water, Solid Waste J	
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Convention Center	n Quality of L	ife Affairs	
Aviation		☐ Human Rights or Immigration			
City Infrastructure or Public	Works	∠ Labor or Workforce	Rules, Prop	osed Rules, or Rule Making	
Civil Service, Municipal Empl Retirement Systems	oyment, or	∠ Land Development or Land Use	∑ Taxation or	Fees	
Code Compliance		Municipal Court	▼ Technology	or Communications	
		Municipal Legislation		tion or Mobility	
Contracts or Procurement		Neighborhoods	Zoning or P	latting	
Diversity, Equity, or Inclusion	า	Parks, Recreation, Libraries, or Museums			
Economic Development		Other:			



Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

CLIENT NAME Client is an individual	Organization Name or Client Last Name, as applicable * McDonald's		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 5508 HIGHWAY 290 WEST Client City* AUSTIN Nature of Client's Business* QUICK SERVICE RESTAURANT	Client Apartment SUITE 201 Client State* TX	or Suite Number Client Zip Code* 78735

Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
	Per City Code Section 4-8-6(a), the exact compens for compensation totaling \$500,000 or more.	ation amo	ount is required

* Indicates a required field

Add Another Client Page



Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

CLIENT NAME Client is an individual	Organization Name or Client Last Name, as applicable* MHR Sonic Drive-in's		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 5725 NW 132nd Street Client City* Oklahoma City Nature of Client's Business* Quick Service Drive-in	Client Apartment o Client State * OK	Client Zip Code*

Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION	Per City Code Section 4-8-6(a), the exact compens for compensation totaling \$500,000 or more.	sation am	ount is <mark>required</mark>

* Indicates a required field

Add Another Client Page



Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

CLIENT NAME Client is an individual	Organization Name or Client Last Name, as applicable* Tacala DBA Taco Bell		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 4125 Round Rock West Client City* Round SRock Nature of Client's Business* Quick Service Restaurant	Client Apartment of Suite 105 Client State * TX	Client Zip Code*

Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION	Per City Code Section 4-8-6(a), the exact compens for compensation totaling \$500,000 or more.	ation amo	ount is required

* Indicates a required field

Add Another Client Page



Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

CLIENT NAME Client is an individual	Organization Name or Client Last Name, as applicable* Whatabrands DBA Whataburger		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 300 Concord Plaza Drive Client City* San Antonio Nature of Client's Business* Quick Service Restaurant	Client Apartment Client State* TX	or Suite Number Client Zip Code* 78216

Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
	Per City Code Section 4-8-6(a), the exact compens for compensation totaling \$500,000 or more.	sation amo	ount is required

* Indicates a required field

Add Another Client Page



Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

CLIENT NAME Client is an individual	Organization Name or Client Last Name, as applicable* The County Line, Inc		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 512 East Riverside Drive Client City* Austin Nature of Client's Business* BBQ Restaurants	Client Apartment of Suite 200 Client State* TX	Client Zip Code*

Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION	Per City Code Section 4-8-6(a), the exact compens for compensation totaling \$500,000 or more.	sation am	ount is <mark>required</mark>

* Indicates a required field

Add Another Client Page



Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

CLIENT NAME Client is an individual	Organization Name or Client Last Name, as applicable* Steffn Waltz		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 1301 West 25th Steet Client City* Austin Nature of Client's Business* Non-conforming Zonina	Client Apartment of 510 Client State * TX	Client Zip Code*

Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION	Per City Code Section 4-8-6(a), the exact compens for compensation totaling \$500,000 or more.	ation amo	ount is required

* Indicates a required field

Add Another Client Page



Section 4: Employee

For each person employed or retained by the individual lobbyist for the purpose of assisting in or preparing for lobbying (excluding purely clerical or administrative assistance), provide a separate page with the information below (City Code Section 4-8-5(B)(4)(c)). If the lobbyist has retained no employees, leave this page blank.

For additional employees, click "Add Another Employee Page" below.

PERSON EMPLOYED OR RETAINED	Title First Name* Last Name * Employer*	Middle Suffix Occupation*
BUSINESS ADDRESS	Business Address* City*	Apartment or Suite Number State* Zip Code*
MAYOR/COUNCIL RELATIVE OR HOUSEHOLD MEMBER	☐ Is the person identified above related (within the thir Council Member, or a member of their household, as If yes, describe the nature of their employment *requir First Name of Mayor/Council Member Las	defined in City Code Section 4-8-6(5)?
		,

* Indicates a required field

Add Another Employee Page

Sections 5, 6 and 7 are for filing Quarterly Activity Reports or a Termination of Lobbyist Registration.

If you are not submitting this form during a quarterly activity reporting deadline or to terminate your lobbyist registration, proceed directly to Section 8: Declaration and Electronic Submission.



Section 5: Statement of No Activity

STATEMENT OF NO ACTIVITY

Lobbyists who have no reportable activity for the reporting period must submit a Statement of No Activity to the Clerk's Office (City Code Section 4-8-6(d)).

By checking the No Activity Confirmation, I affirm that I have no reportable activity during this reporting period, as defined by the four conditions below.

- I have no Client Compensation to report during this activity period (§4-8-6(A)(2)).
- I have no Expenditures for lobbying to report during this activity period (§4-8-6(A)(3)).
- I have not exchanged money, goods, services, or anything of value totaling more than \$500 with a business entity in which a City Official has a substantial economic interest during this reporting period (§4-8-6(A)(4)).
- I have no employees who are household members or related (within third degree of consanguinity or affinity) to the Mayor or a Council Member to report during this reporting period (§4-8-6(A)(5)).

No Activity Confirmation I have read the four conditions above and confirm that I have no reportable activity to disclose during this reporting period



Section 6: Expenditure Totals

Provide the total amount of expenditures for lobbying, sub-totaled by the categories listed below. A blank value will be interpreted as \$0 spent in that particular category (§4-8-6(A)(3)).

Cumulative expenditures of more than \$50 by an individual lobbyist per day per City Official in the expense categories listed below must be itemized on an Expenditure page.

EXPENDITURE TOTALS (Blank values will be interpreted as \$0)	(\$) Reimbursement to Others
	(\$) Food and Beverages
	(\$) Transportation and Lodging
	(\$) Gifts (other than Awards and Mementos)
	(\$) Entertainment
	(\$) Awards and Mementos
	(\$) Honorariums
	(\$) Attendance of Council Members at Charitable Events or Fundraisers
	(\$) Media Communications (broadcast, print, advertising, etc.)
	(\$) Payments to persons who assist with Media Communications as defined in §4-8-6(A)(3)(j)



Section 7: **Expenditure**

5/15/2017

For each itemized expenditure, provide a separate page with the information below. Cumulative expenditures of more than \$50 per day per City Official in the expense categories provided below must be itemized on an Expenditure Page (§4-8-6(A)(3)).

Per §4-8-6(A)(4), exchanges of money, goods, services, or anything of value to a business or business interest of a City Official that total\$500 or more during the reporting period must also be itemized on an Expenditure Page.

For additional expenditures, click "Add Another Expenditure Page" below.

PAYEE NAME	Organization Name or Payee Last Name, as applicable*			
AND				
BUSINESS	☐ This payee is a business or business interest of a City Official			
INTEREST	If yes, First Name of City Official Last Name of City Official		icial	
Payee is an individual				
	Department of City Official	Job	Title of City Officia	al
DAVE	Payee Address/ PO Box*		Payee Apartmen	nt or Suite Number
PAYEE				
ADDRESS	Payee City*		Payee State*	Payee Zip Code*
	(\$) Expenditure Amount* Expenditure Date* Category*			
EXPENDITURE				
DETAILS	Purpose of the Expenditure*			
	ho benefitted from or who may	, have been influer	nced by the ex	xpenditure, if applicable
City Official First Name	City Official Last Name	Departmen		Job Title
Add Another Expenditure Page			Delete thi	is page Page 13 of 14 Revised:



Section 8: Declaration and Electronic Submission

DECLARATION

By my signature below and subject to the penalty of perjury, I swear or affirm that the facts provided in this Lobbyist Reporting Form are true and correct to the best of my knowledge and belief and include all information required to be reported by me pursuant to City Code, Chapter 4-8.

I understand that pursuant to §4-8-9(E) of the Austin City Code, this report is made under oath regardless of whether there is any jurat or affidavit of verification, including a signature.

	12/31/2018
Signature of Registrant	Report Date*
Alice A. Myers	
Printed/Typed Name	

Electronic Submission and Signature

I have completed a Lobbyist Contact Information Form, and my signature and e-mail address are both on file at the City Clerk's Office.

New or Renewing Lobbyist Registrations are not considered complete until the appropriate registration fee has been paid. If you are registering for the first time as a lobbyist or are renewing your annual registration, you must remit payment via cash, check, or money order for your submission to be considered complete. Registrations with outstanding balances or fees will be subject to a late filing fee.

Submit this form via e-mail